

JPW

PTO/SB/21 (09-04)
Approved for use through 07/31/2006. OMB 0651-0031
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/511,317	
	Filing Date	15 October, 2005	
	First Named Inventor	SHAUNAK, Sunil	
	Art Unit	TBA	
	Examiner Name	TBA	
Total Number of Pages in This Submission	344	Attorney Docket Number	POLYT 9351 WO-US

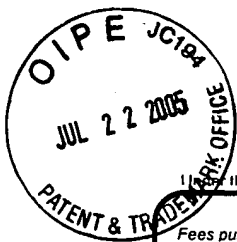
ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Nine (9) references
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Bell & Associates		
Signature			
Printed name	Matthew Kaser		
Date	20th July, 2005	Reg. No.	44,817

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Matthew Kaser	Date	20th July, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04v2)
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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 0.00

Complete if Known

Application Number	10/511,317
Filing Date	15 October, 2005
First Named Inventor	SHAUNAK, Sunil
Examiner Name	TBA
Art Unit	TBA
Attorney Docket No.	POLYT 9351 WO-US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 50-3194 Deposit Account Name: Bell & Associates

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims Extra Claims Fee (\$) Fee Paid (\$)

- 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)

- 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)


- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____ Fees Paid (\$) 0.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 44,817	Telephone (510) 537-2040
Name (Print/Type)	Matthew Kasar	Date 20 July 2005	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of : SHAUNAK, Sunil, et al.

Title: **GLYCODENDRIMERS HAVING BIOLOGICAL ACTIVITY**

Serial No.: 10/511,317

Filing Date: 15th October, 2004
371(c) Date: 31st May, 2005

Examiner: TBA

Group Art Unit: TBA

Mail Stop Amendment
Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUBMISSION OF INFORMATION DISCLOSURE STATEMENT PURSUANT TO 37 C.F.R. §1.97
and §1.98

Dear Sir:

Applicant herewith submits an Information Disclosure Statement (IDS) under the provisions of 37 CFR § 1.97 (b)(1) and § 1.98 in the above-referenced utility patent application. Applicant herewith includes nine (9) copies of publications cited in Form 1449 (Reference 1, Reference 2, Reference 3, Reference 4, Reference 5, Reference 6, Reference 7, reference 8, and Reference 9).

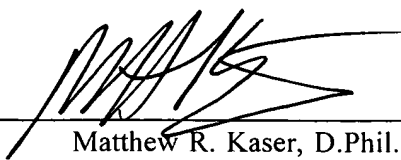
Applicant believes that, since this IDS has been filed at the US PTO prior to a first Office action on the merits of the claimed invention, no fee is due. However, if the Commissioner determines that a fee is due, the Commissioner is hereby authorized to debit the fee from **Bell & Associates Deposit Account No. 50-3194**.

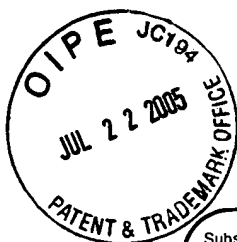
Respectfully submitted,

Date: 20th July, 2005

By: _____

Bell & Associates
416 Funston Ave., Ste 100
SAN FRANCISCO CA 94118


Matthew R. Kaser, D.Phil.
Registration No. 44,817
Direct Telephone: (510) 537-2040



PTO/SB/08B (07-05)
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INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)		Complete if Known			
		Application Number	10/511,317		
		Filing Date	15 October 2004		
		First Named Inventor	SHAUNAK, Sunil		
		Art Unit	TBA		
		Examiner Name	TBA		
Sheet	2	of	2	Attorney Docket Number	POLYT 9351 WO-US

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	2	Tomalia et al., Angewandte Chemie-International Edition in English, 1990, vol. 29, pp. 138-175	
	3	Newkome et al., Journal of Organic Chemistry, 1992, vol. 57, pp. 358-362	
	4	Jansen et al., Science, 1994, vol. 266, pp. 1226-1229	
	5	Page and Roy, Bioconjugate Chemistry, 1997, vol. 8, pp. 714-723	
	6	Ashton et al., Chemistry A European Journal, 1997, vol. 3, pp. 974-984	
	7	Malik et al., Journal of Controlled Release, 2000, vol. 65, pp. 133-148	
	8	Tsutsumiuchi et al. Polymer Journal, 1999, vol. 31, pp. 935-941 (Abstract only)	
	9	Shaunak et al. Nature Biotechnology, 2004, vol. 22, pp. 977-984, Supl. pp 1-10	

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.
1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.
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